

## City of Morro Bay Human Resources Department

595 Harbor Street • Morro Bay, CA 93442 • (805) 772-6207

The law prohibits discrimination because of age, sex, religion, race, color, marital status, disability, national origin, sexual orientation, or any legally protected status, and requires affirmative action in the hiring of disabled and veterans. The City of Morro Bay is an equal opportunity employer. If you need assistance in completing this application, please let us know.

Instructions to applicants:  1. Print clearly. Fillable PDF available: www.morro-bay.ca.us./humanresources  2. Answer all questions completely and accurately.  3. Avoid any refrence to race, color, religion, national origin, or sex.  4. False statements are cause for rejection of application, removal of name from eligible list, or dismissal		1. Print exact title of the position you are applying for:						_
		2. Print your full name:						
		3. Address		(Fi	rst)		(Middle)	
		(City)		(Sta		(Zip)	()	_(h) _(w) _(c)
		related to anyone working for the		6. Drivers License #				
•	Relationsh	ip:	State of	Issue:				
Yes No		nt:		Expiration	on Date	:		
7. <b>EDUCATION</b> Check highest grade cor	mpleted:	1 2 3 4	5 6	7	8	9 1	10 11 12	
Name and Location of So	chool				_ Did	you gradu	ıate? Yes N	VО
COLLEGE C	R UNIVERSITIES	S ATTENDED		MAJOR		UNITS	DEGREE RECEIVED	
8a. Clerical Skills: Ty	yping	Data Entry	Word Proc	essing		Ten-Key	Pad	
8b. Professional Licenses	or Certificate	25:						
8c. Professional Member	ships:							
8d. If not a high school g	ıraduate, do <u>y</u>	you have a GED certificat	e? Ye	S	No			
8e. Do you speak any lar	nguages othe	r than English fluently?	Yes		No			
8f. Are you a CALPERS re	tired annuita	nt? Yes	No					

9. **EXPERIENCE** List your present or most recent job first. Carefully account for all recent employment (at least the last ten years). By giving complete information, you will improve your chances for employment. If you need more space, please attach additional sheets. The information requested below must be completed.

## A resumé may be attached, but not referenced in lieu of completing this information.

DO YOU OBLECT TO HAVING YOUR PRESENT	EMPLOYER CONTACTED?	Yes	NO		
Month/Year From	То	Title of your position		Work Phone #	
Name and Address of Employer		Duties of Your Position			
Name of Supervisor		# of Employees Supervised		Hours Worked Per Week	
Reason for Leaving		Salary \$	per		
Month/Year From	То	Title of your position		Work Phone #	
Name and Address of Employer		Duties of Your Position			
Name of Supervisor		# of Employees Supervised		Hours Worked Per Week	
Reason for Leaving		Salary \$	per		
Month/Year From	То	Title of your position		Work Phone #	
Name and Address of Employer		Duties of Your Position			
Name of Supervisor		# of Employees Supervised		Hours Worked Per Week	
Reason for Leaving		Salary \$	per		
Month/Year From	То	Title of your position		Work Phone #	
Name and Address of Employer		Duties of Your Position			
Name of Supervisor		# of Employees Supervised		Hours Worked Per Week	
Reason for Leaving		Salary \$	per		
Month/Year From	То	Title of your position		Work Phone #	
Name and Address of Employer		Duties of Your Position			
Name of Supervisor		# of Employees Supervised		Hours Worked Per Week	
Reason for Leaving		Salary \$	per		
10. Why are you interested in this position?					
11. Use this space for any additional information	n you wish to provide concerning	your qualifications for this po	sition.		
12. Certification by Applicant: I hereby certify th	nat all the statements made in this	application are true and com	nplete to the best o	of my ability.	
Signature of Applicant				Date	

## **EQUAL EMPLOYMENT OPPORTUNITY DATA (VOLUNTARY)**

This information is requested to assist the City in complying with Federal and State statistical reporting requirements. The data you provide will be detached from your application, filed separately, and used only for research purposes. No one connected with the hiring process will have access to this information.

NAME (Optional)	POSITION APPLIED FOR	DATE	AGE	
MALE	WHITE, CAUCASIAN	ASIAN or PACIFIC ISLA	ASIAN or PACIFIC ISLANDER	
FEMALE	BLACK (Includes African, Jamaican, Trinidadian, and West Indian descent			
PHYSICAL HANDICAP (Describe accommodations required, if any)	HISPANIC	AMERICAN INDIAN or	r ALASKAN	
	OTHER (ABOVE CATEGORIES	DO NOT APPLY		

## **SOURCE**

How did you learn about this job opening? Please indicate:

Job Flyer	Newspaper	
TV	Magazine	
Radio	Other	